

PUBLIC HEALTH SEATTLE & KING COUNTY

APPLICATION FOR RECONSIDERATION OF DECISION/ORDER KING COUNTY SEWAGE REVIEW COMMITTEE (Process) (Submit five complete application sets)

DATE RECEIVED

APPLICATION FACE PAGE

\$1160.00 APPLICATION FEE RECEIVED _____

APPEAL FILE # _____

Name of Applicant _____

Applicant's Mailing Address _____

Interest of Applicant _____ Daytime Phone (_____) _____

Fax (_____) _____ e-mail address _____

Name and mailing address of property owner _____
(if different than above)

Address of Subject Property _____

Parcel Number (APN) _____

Legal Description of Property: (for lengthy descriptions provide this information on a supplemental page)

The following information is intended to assist the Sewage Review Committee in evaluating your appeal. You may attach additional pages if necessary. The applicant's name and/or address of the subject property should be indicated at the top of each supplemental page or exhibit.

1. Description of Waiver Request: Reference the portions of the code and/or policies of which you are requesting a waiver or modification. If necessary, attach additional pages and/or **narrative** to clarify your request(s).

Code Section / Policy #	Brief Description

2. Will your neighbors or the owners of any nearby property or subsequent owners of your property be harmed in any way by the variance you have requested? Give reasons (e.g. technical justification) for your answer.

3. NOTIFY ALL OWNERS OF PROPERTY LOCATED WITHIN 300 FEET OF YOUR LAND OR OWNERS OF THE NEAREST 15 PROPERTIES, WHICHEVER IS GREATER. SPECIFIC INSTRUCTIONS ARE ON THE ATTACHED FORM.

4. IF APPLICABLE, ATTACH EXHIBITS TO SUPPORT YOUR APPEAL. EXHIBITS SHOULD CLEARLY SHOW THE REASONS CITED BY THE DISTRICT SERVICE CENTER FOR DISAPPROVAL. IF NECESSARY TO ESTABLISH REASONS, YOU SHOULD ALSO ATTACH SUPPORTING DATA. THIS MAY CONSIST OF GEOLOGIST'S REPORTS, MANUFACTURER'S LITERATURE, ENGINEER'S REPORTS, PHOTOGRAPHS OR OTHER PERTINENT DATA.